

# ORIGINAL

SIDE ONE

STATE CORPORATION COMMISSION OF KANSAS  
OIL & GAS CONSERVATION DIVISION  
RECOMPLETION FORM  
ACO-2 AMENDMENT TO WELL HISTORY

Operator: License # 5058

Name: Griggs Oil Inc.

Address: 107 N. Market, Suite 800

City/State/Zip: Wichita, KS 67202

Purchaser: Clear Creek

Operator Contact Person:  
Phone: (316) 267-7779

Designate Type of Original Completion  
 New Well  Re-Entry  Workover

Date of Original Completion <sup>87</sup> 10-31-75

Name of Original Operator Barnett Oil Inc.

Original Well Name Bell #1

Date of Recompletion:  
9-14-90 9-17-90

Commenced \_\_\_\_\_ Completed \_\_\_\_\_

Re-entry  Workover

Designate Type of Recompletion/Workover:  
 Oil  SWD  Temp. Abd.  
 Gas  Inj  Delayed Comp.  
 Dry  Other (Core, Water Supply, etc.)

Deepening  Re-perforation  
 Plug Back  PBD  
 Conversion to Injection/Disposal

Is recompleted production:

Commingled Docket No. \_\_\_\_\_  
 Dual Completion Docket No. \_\_\_\_\_  
 Other (Disposal or Injection?) Docket No. \_\_\_\_\_

API NO. 15- 065-20-785-6001

County Graham County

NW NE NW Sec. 11 Twp. 9 Rge. 24  East West

4950 Ft. North from Southeast Corner of Section

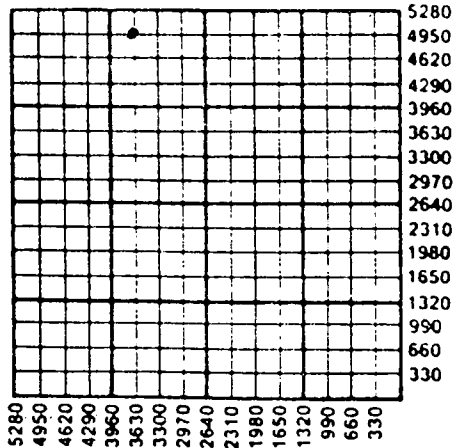
3630 Ft. West from Southeast Corner of Section  
(NOTE: Locate well in section plat below.)

Lease Name Bell Well # 1

Field Name Holley

Producing Formation Lansing KC

Elevation: Ground 2414 KB 2419



**K.C.C. OFFICE USE ONLY**

F  Letter of Confidentiality Attached  
 C  Wireline Log Received  
 C  Drillers Timelog Received

**Distribution**

KCC  SWD/Rep  NGPA  
 KGS  Plug  Other (Specify)

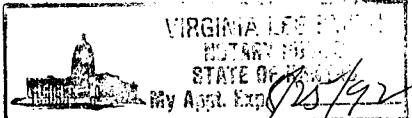
**INSTRUCTIONS:** This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the recompletion of any well. Rules 82-3-107 and 82-3-141 apply. Information on side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form. See rule 82-3-107 for confidentiality in excess of 12 months. One copy of any additional wireline logs and driller's time logs (not previously submitted) shall be attached with this form. Submit ACO-4 or ACO-5 prior to or with this form for approval of commingling or dual completions. Submit CP-1 with all plugged wells. Submit CP-111 with all temporarily abandoned wells. **NOTE: Conversion of wells to either disposal or injection must receive approval before use; submit form U-1.**

All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature Wilber D. Berg Title Prod. Supt. Date 12-28-90

Subscribed and sworn to before me this 28th day of Dec. 1990

Notary Public Virginia Lee Smith Date Commission Expires 8/25/92



SIDE TWO

Operator Name Griggs Oil Inc. Lease Name BELL Well # 1

Sec. 11 Twp. 9 Rge. 24  
 East  
 West

County Graham

RECOMPLETION FORMATION DESCRIPTION

Log  Sample

Name Top Bottom

ADDITIONAL CEMENTING/SQUEEZE RECORD					
Purpose:	Depth		Type of Cement	# Sacks Used	Type and Percent Additives
	Top	Bottom			
<input type="checkbox"/> Perforate					
<input type="checkbox"/> Protect Casing					
<input type="checkbox"/> Plug Back TD					
<input type="checkbox"/> Plug Off Zone					

Shots Per Foot	PERFORATION RECORD Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)
3	3907-10	1000 Gal. non E Acid

PBTD \_\_\_\_\_ Plug Type \_\_\_\_\_

TUBING RECORD

Size 2 3/8 Set At 3958-04 Packer At \_\_\_\_\_ Was Liner Run \_\_\_\_\_ Y NO N

Date of Resumed Production, Disposal or Injection 9-17-90

Estimated Production Per 24 Hours Oil 12 Bbls. Water 5 Bbls. \_\_\_\_\_ Gas-Oil-Ratio

Gas \_\_\_\_\_ Mcf

Disposition of Gas:

Vented  Sold  Used on Lease (If vented, submit ACO-18.)